

Michigan Association for Deaf & Hard of Hearing

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Testimony Health Policy Committee May 18, 2010

Hello Everyone!

I am Nan Asher, ED of MADHH, and chairperson for the MCDHHP. I am here to support passage of HR 104, the resolution to memorialize the U.S. House of Representatives to pass HB 1646, the Federal Hearing Aid Assistance Tax Credit. I appreciate the opportunity to address this important issue, not only for myself and my family, but for the population of whom my agency serves. I also wish to thank you for providing access via CART, and FM to today's hearing.

As you might have guessed, hearing loss will affect all of you at some point, if not personally, than certainly a loved one. If you live long enough, chances are high that you will be affected directly by hearing loss. I know you are hearing a lot of statics today, so I am going to focus specifically how my agency has changed its services over the years to reflect the growing problem of Michigan consumers getting quality affordable hearing aids.

For a long time, our agency partnered with Local Lions Clubs to recycle and purchase new hearing aids for those who were most needy. Over the past six years, the definition of needy went from 100% of poverty level to up to 300% of poverty level. The Lion clubs have moved from 100% funding to an increasing level of co-pays they insist recipients provide, ranging from \$5.00 to \$300 per new hearing aid. In addition, while the Lions Clubs will often pay for the ear-molds and audiologist's time, our organization cannot offer that comprehensive service. But the Lions can only help so much, and their funds for the year, were primarily spent within the first six months. So we have had to come up with alternative solutions to help people receive or keep their hearing aids functioning. My organization will now help people repair old analog hearing aids, some of which are 25 years old, which may not be appropriate if their loss has changed over the years. My agency also loans out loaner hearing aids for children, youth and adults to keep people in hearing aids until theirs can be repaired, replaced or purchased. Recently we started selling used hearing aids, as people didn't want to return them after the loan time was up, and they would once again be without hearing aids. Again, these aids are not new, and most have already gone well beyond their intended useful life. It is like renting a 20 year old car such as a "rent-a-wreck" for hearing aids, which is not a good permanent solution. These clients must have an audiologist working with them to fit hearing aids, so they often bare additional programming ear-mold costs, than just the hearing aids.

We recently had a consumer come into our office and check out FOURTEEN (14) hearing aids to find ONE digital aid that was suitable for her profound hearing loss. She ended up purchasing the hearing aid from us for a very modest sum of \$200.00, which she put on her credit card, as she didn't have the money, but a comparative new one would have cost her over \$3,000, and this aid was already two generations old. A hearing aid tax credit would have taken off some of the burden, and she would have a longer life span and a two year warranty with a new aid. The aid she received from our office has no warranty and is "as is." She felt she had no alternative, and needed a hearing aid to continue working to support her family of three. Her husband is also deaf and also currently needs

hearing aids. They are on a waiting list to see if an appropriate recycled hearing aid comes in, that can be used by him.

Like others in this room, I currently have an older set of hearing aids, (mine are 8 years old) that have been in the repair shop twice, and as a professional person that relies tremendously upon this technology, you would think I would have the latest and greatest, but that is not the case, and I can only hope that my aids continue to function for me as long as possible. I can get a decent used car cheaper than a pair of hearing aids that would enable me to hear and function better. I am on the sixth set of hearing aids in my 44 years of wearing them, an average of 7.3 years per pair, so I am already overdue for a new pair. But you know how it is, I replaced my roof, (which was about the cost of one hearing aid) and I have two children who depend upon me, as their primary college scholarship funds has been nixed due to Michigan Merit or Michigan Promise Scholarships funding being dropped.

I do want to point out that untreated hearing loss has undesirable consequences for both for the individual and for society as a whole. For the individual, there is not only the loss of income earning capacity, an educational disadvantage, social isolation, and often as a result, psychological depression, especially those with acquired hearing losses. Children with appropriate hearing aids will be less likely to need expensive special education services and will acquire the language skills and other education to grow into productive citizens. People who would otherwise be dependent on government assistance can become tax-paying citizens, such as me.

For all these reasons and many more provided by other people here, providing this tax credit should have a positive effect on not only personal but also government budgets. Passage of HR 1646 would help correct an inexcusable inequality. Why should most people have help with the cost of medical needs but not those of us with hearing loss? Why should we be singled out for exclusion so that we have to assume this large financial burden and many of us must do without a basic medical necessity? Not only are the costs of the hearing aids borne by us, but also the repairs and batteries to keep them functioning can add up. Why should people with hearing loss who are unable to afford the periodic outlay of thousands of dollars be denied this, and as a consequence, denied other benefits of our society?

Lastly, inappropriate misdiagnosis of dementia is often given to older people with untreated hearing loss who are not hearing the questions used to test their cognitive functioning and therefore often respond inappropriately, so their brain is assumed to be malfunctioning instead of their ears. The end result is often unnecessary institutionalization with large quality-of-life and financial cost that is borne by much of the population in the form of Medicaid taxes. Hearing tests and hearing aids, although expensive, are a far less expensive and more appropriate intervention for this population.

For the above reasons, I strongly urge the passage of HR 104 in support of U.S. Congress HB 1646. HB 1646 has 118 co-sponsors including members of both political parties. A companion resolution has already passed in the Michigan Senate with bipartisan support.

Again, I greatly appreciate the opportunity to share my experience in this area.

--Nan Asher
Executive Director

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